

**PATIENT**

Luke Kuhn

**SPECIES**

Canine

**BREED**

Border Collie

**SEX**

MN

**AGE**

10 years

**WEIGHT**

60 lbs.

**INTERPRETED BY**

R. McKenzie Daniel,  
DVM, DABVP  
(Canine and Feline)

**IMAGING PERFORMED BY**

Sarah Pender, CVT

**HOSPITAL NAME**

SVS Imaging QC

**REFERRING VET**

Dr. Hartmann

**INVOICE**

13563

**DATE**

3/25/22

**PRESENTING CLINICAL SIGNS**

Declining activity level. Owners used to walk him several miles a day and over the last several months has stamina has diminished. He gets tired easily and pants. Can only go a small walk around the block now. Normal water and food habits.

Abnormal PE/Chem/CBC/UA Results: T4 - 0.8 (suspect sick euthyroid) Rest of BW - WNL Rads - Irregular liver margins, unable to visualize spleen

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****Urinary System**

The urinary bladder, trigone, and cystourethral junction exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

No overt pathology was noted in the area of the residual prostate.

The area of the aortic trifurcation was free of pathology.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 5.9 cm in length. The right kidney measured 6.1 cm in length.

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.48 cm width at the caudal pole and 0.38 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.73 cm width at the caudal pole and 0.44 cm width at the cranial pole.

**Spleen**

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

**Liver/ Gallbladder**

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

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***Gastrointestinal***

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction, or foreign material.

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The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction, or foreign material.

Normal visible colon wall layers were present with apparent formed feces in lumen.

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Border Collie

***Pancreas***

The parenchyma of the left limb, body, and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease were evident.

**SEX**

MN

***Free Abdomen***

Unspecified irregular hypoechoic to mixed echogenic mass in the left ventral cranial abdomen directly adjacent to and effacing the mid to left ventral liver measuring 8.0-9.0 cm in diameter was present. Subtle evidence of reactive mesentery to tissue around the unspecified mass was present. Previously noted homogeneous mass consistent with fat echogenicity was present in the subjective right cranial abdomen measuring approximately 15.0 cm in diameter. No evidence of overt lymphadenopathy or peritoneal effusion was noted.

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**ULTRASONOGRAPHIC FINDINGS*****Primary Findings***

- Mild hepatic parenchymal remodeling
- Mild chronic renal changes
- Unspecified hypoechoic to mixed echogenic mass in subjective mid to left cranioventral abdomen adjacent to liver
- Previously noted probable lipoma right cranial abdomen

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS****HOSPITAL NAME**

SVS Imaging QC

The hypoechoic to mixed echogenic mass present in the mid to left cranioventral abdomen appeared to be separate from the previously reported right cranial abdominal lipoma. The unspecified mass was not consistent with typical fat echogenicity. Potential for hepatic origin of the mass is possible, although not definitive with neoplastic criteria favored. Potential extension of the mass into the cranial thoracic cavity cannot be excluded.

**REFERRING VET**

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Assuming normal clotting status, ultrasound-guided FNA of the hypoechoic to mixed echogenic mass is warranted for screening cytology and potential for other clarification. Thoracoabdominal CT is likely ideal given this presentation for further assessment if possible. Three view chest radiographs are suggested if not done.

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svsmobileimaging.com 309-737-3070



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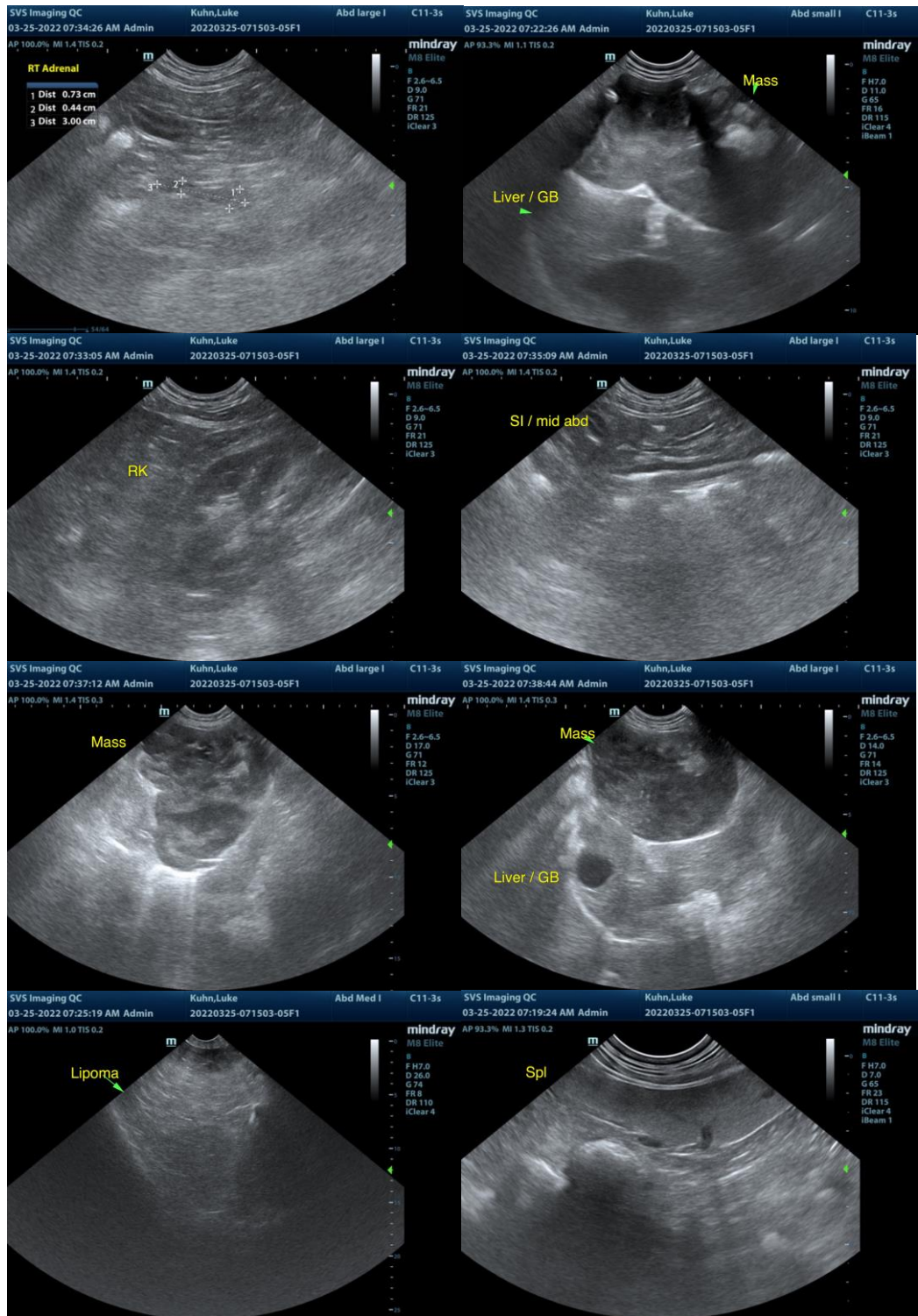
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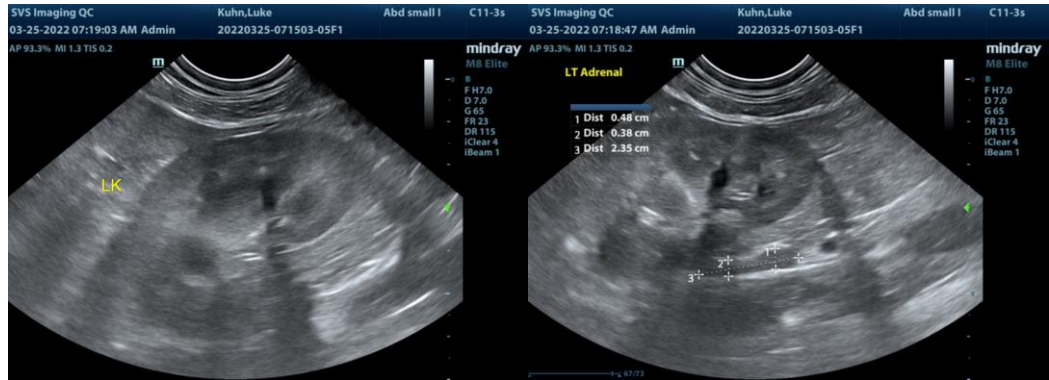
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

**R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)**  
info@SonoPath.com